Application Data Sheet

Application Information

Application Type::

Utility Patent Application

Title::

PROSTHETIC VALVE THAT PERMITS

RETROGRADE FLOW

Attorney Docket Number::

1-37213

Suggested Drawing Figure::

Eight

Total Drawing Sheets::

Seven

Small Entity?::

No

Petition Included?::

No

Applicant Information

Applicant Type::

Inventor

Primary Citizenship Country::

U.S.A.

Given Name::

Thomas

Middle Name::

Α.

Family Name::

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City Residence::

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State or Province of Residence::

Indiana

Country of Residence::

U.S.A.

Street of Mailing Address::

9480 S. Pointe LaSalles Drive

City of Mailing Address::

Bloomington

State or Province of Mailing Address:: Indiana

Country of Mailing Address::

U.S.A.

Postal or Zip Code::

47401

Applicant Type::

Inventor

Primary Citizenship Country::

U.S.A.

Given Name::

Brian

Middle Name::

C.

Family Name::

Case

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State or Province of Residence::

Indiana

Country of Residence::

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841 Rosewood Drive

City of Mailing Address::

Bloomington

State or Province of Mailing Address:: Indiana

Country of Mailing Address::

U.S.A.

Postal or Zip Code::

47404

Applicant Type::

Inventor

Primary Citizenship Country::

U.S.A.

Given Name::

Mark

Middle Name::

W.

Family Name::

Bleyer

City Residence::

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State or Province of Residence::

Indiana

Country of Residence::

U.S.A.

Street of Mailing Address::

1849 Blackbird Court

City of Mailing Address::

West Lafayette

State or Province of Mailing Address:: Indiana

Country of Mailing Address::

U.S.A.

Postal or Zip Code::

47906

Correspondence Information

Correspondence C	ustomer Number::	4859		
Representative Inf	ormation			
Representative Cu	stomer Number::	4859		
Domestic Priority I	nformation			
Application::	Continuity Type::	Parent Application::		Parent Filing Da
This Application			·	
Claims benefit of	Provisional	60/454,249		March 12, 2003
Claims benefit of	Provisional	60/488,138		July 16, 2003
Foreign Priority Inf	ormation			
		Number::	Filing Date::	Priority Claime
	ormation Application	Number::	Filing Date::	Priority Claime
		Number::	Filing Date::	Priority Claime
		Number::	Filing Date::	Priority Claime
Country::	Application	Number::	Filing Date::	Priority Claime
Country:: Assignee Informati	Application	Number::	Filing Date::	Priority Claime
Country:: Assignee Information Assignee name::	Application	Number::	Filing Date::	Priority Claime
Country:: Assignee Information Assignee name:: Street of Mailing a	Application	Number::	Filing Date::	Priority Claime
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